P0000073693

(Re	questor's Name)	
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Certified Copies	_ Certificates	s of Status
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SECRETARY OF STATE

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COVERLETTER	
TO: Amendment Section Division of Corporations	
SUBJECT: Neiman and Associates, Inc	
DOCUMENT NUMBER: <u>P0000073692</u>	
The enclosed Articles of Dissolution and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Bonnie Neiman	
(Name of Contact Person)	
Heiman and HSSociates, Inc	,
(Firm/Company)	
10M Mist Flower Cane 50 2.	77
(Address)	Particular C
Oroveland, PL 34736	1
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Sonnie Neiman at (352) 432-5868 (Name of Contact Person) (Area Code) (Daytime Telephone Number)	_
Enclosed is a check for the following amount:	
\$35 Filing Fee \$\sum \\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) \$\$43.75 Filing Fee & \$\sum \\$52.50 Filing Fee, Certified Copy (Additional copy is enclosed)	
Division of Corporation (
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tellelegger FL 32314	
Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301	

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of State:
	Neiman and Associates, Inc
SECOND:	The document number of the corporation (if known): P00000 7369 Z
THIRD:	The date dissolution was authorized: $4/20/16$
	Effective date of dissolution if applicable: In mediately of confedence (no more than 90 days after/dissolution filedate) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will
	not be listed as the document's effective date on the Department of State's records.
FOURTH:	Adoption of Dissolution (CHECK ONE)
,	Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.
ŕ	Dissolution was approved by the shareholders through voting groups.
	The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:
	The number of votes cast for dissolution was sufficient for approval by
	Neiman and Associates, Inc Bonnie (voting group) and norman Werman
	and Norman Werman
	Signature: (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)
	BONNIE GNEIMAN, COO (Typed or printed name of person signing)
	NORMAN NeiMAN, CEO (Title of person signing)

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution. Name of Corporation: Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution. Description of information that must be included in a claim: Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice. NEIMAN